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PATENT APPLICATION FEE DETERMINATION RECERD Substitute for Form PTO-875										Application or Docket Number		
	Α	PPLK			D – PART I (C	SMALLE	ENTITY	OR	OTHER THAN SMALL ENTITY			
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
BASIC FEE (\$7 CFR 1.16(a), (b), or (c))			N/A			. N/A ,		N/A	·		N/A	
SEARCH FEE (37 CFR 1.16(K), (1), or (m))			N/A			N/A		. N/A .			N/A	
EXAMINATION FEE (37 OFR 1.16(0), (p), or (q))			N/A			N/A	•	N/A			N/A	
TOTAL CLAIMS (37 CFR 1.16(1))			minus 20 =		0 = 1	•		× 25 =	7. · · · ·	OR	× 50 =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =		= .	•		× 105 =	· · · · · · · · · · · · · · · · · · ·		× 210 =	·
APP FEE	PLICATION SIZE		sheets of is \$260 (\$ additional	paper, the 130 for a 50 shee	ne application s small entity) foi ets or fraction th	drawings exceed 100 plication size fee due entity) for each fraction thereof. See and 37 CFR 1.16(s).		·		•		
MUI	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(II))							185	· .	. ,	370	
* If the difference in column 1 is less than zero, enter *0* in column 2.								TOTAL		(, ,	TOTAL	
APPLICATION AS AMENDED - PART II												
VT A		REN	LAIMS MAINING FTER NDMENT	. ,	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
AMENDMENT	Total (37 CFR 1.16(1))	**	1	Minus	<u>"20</u>	<u>.</u>]	× 25 =		OR	х бо =	j.
뮑	Independent (37 CFR 1,16(h))	. 3	3	Minus	<i>"3</i>	= -,		x. 105 =		OR	x 210 =	
AME	Application Size Fee (37 CFR 1.16(s))]	100			244	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I))							185		OR	340	
						•	. •	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	·
_	·.		lumn 1)		(Column 2)	(Column 3)	_	·				
ENT B.		RÉM Al	LAIMS MAINING IFTER NOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
Σ	Total (77 CFR 1.16(7))	<u> </u>	:	Minus	••	=		× 25 =		OR	× 50 =	
QNE	Independent (37 OFR 1.16(h))		·	Minus	***	=		× 105 =		OR	x 210 =	
AMEN	Application Size Fee (37 CFR 1.16(s))]	185			270	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR	370.	
							:	TOTAL ADD'L FEE		OR	TOTAĻ ADD'L FEE	
	* If the entry in o	olumh f Numbe	1 is less that r Previously	n the entr	y in oolumn 2, wr ' IN THIS SPACE	rite "0" in column E is less than 20	1 3. . en	ter "20".		• • •		F 150 7

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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